

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>A</i>	<i>13</i>	<i>5/21/01</i>
FORMALITY REVIEW	<i>A-S</i>	<i>943</i>	<i>7-12-1</i>
RESPONSE FORMALITY REVIEW	<i>KS</i>	<i>50906</i>	<i>10/10/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3-04
2	✓
3	✓
4	✓
5	✓
6	0
7	0
8	=
9	=
10	=
11	=
12	=
13	=
14	✓
15	✓
16	✓
17	✓
18	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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10/10